

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

* 02-272
 Clear Channel Broadcasting
 Licenses, Inc.
 2625 South Memorial Drive
 Suite A
 Tulsa, OK 74129

2. Article N

PS Form 3

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

x C. Hickman

☐ Agent☐ Addressee

D. Is delivery address different from item 17? If YES, enter delivery address below:

☐ Yes
☒ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes
☒ No

DOCKET NO. 02-272

CERTIFIED

MAIL

RETURN

RECEIPT

REQUESTED

NAME: Clear Channel Broadcasting

2625 South Memorial Drive

Suite A

Tulsa, OK 74129

ORDER DATED

9-4-02

FCC 02-246

MIMEOGRAPH NO.

U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

Article Sent To:

Postage

\$.83

Certified Fee

2.30

Return Receipt Fee
(Endorsement Required)

1.75

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$ 4.88

Name (Please Print Clearly) (to be completed by mailer)

Clear Channel Broadcasting

Street, Apt. No., or PO Box No.

2625 South Memorial Drive

Tulsa, OK 74129

U.S. Form 3800, July 1990

See Reverse for Instructions